



State of Utah

Department of Human Resource Management

EMPLOYEE JOB TERMINATION EXIT INTERVIEW

Please explain the following to the employee and clearly mark all items indicated; if not applicable, write "NA" in the space provided.

Employee:

- ☐ **Retirement Options:** Complete Employee Benefits Notification Form for Retirement.
- ☐ **Insurance Options:** Complete Employee Benefits Notification Form for Insurance.
- ☐ **Voice Mail:** Change their phone to front desk.

Agency/Office Concerns:

Explained

- ☐ Unemployment Compensation
- ☐ Flexible Reimbursement Program (FLEX\$)

Materials to Return:

Returned

Follow Through

Group Insurance Prescription Card(s)		
State Credit Card		
Identification Card (State ID Card)		
Security Access Card		
State-owned Uniform		
State-owned Vehicle (keys)		
State-owned Manuals, Books, Documents		
State-owned Weapon		
State-owned Keys (office, other)		
Computer Security Access Codes (cancelled)		
State-owned Tools and/or Equipment		
Money Owed to the State		
Other (please Specify):		

Please verify home address for possible future correspondence.

Home Address:

City

State:

Zip:

As I terminate my employment with the State of Utah, I certify that I have received and understand the above explanations and materials concerning my insurance and retirement options. I also hereby certify that I have returned or am now returning all items in my possession that are the property of the State of Utah. I understand the possibility of my last paycheck being held awaiting completion and/or the results of this interview and form.

Employee:

Employee Name (please print)

Employee Title

Employee Signature

Date

Interviewer:

Interviewer's Name (please print)

Agency/Dept.

Interviewer's Signature

Date

REASON FOR LEAVING STATE EMPLOYMENT (Optional): Check all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Abandonment of Position | <input type="checkbox"/> Other Reasons |
| <input type="checkbox"/> Deceased | <input type="checkbox"/> Other Employment |
| <input type="checkbox"/> Dismissal | <input type="checkbox"/> Relocation |
| <input type="checkbox"/> Education | <input type="checkbox"/> Retirement |
| <input type="checkbox"/> End of At-Will Employment | <input type="checkbox"/> Reduction in Force |
| <input type="checkbox"/> Military Service | |